

497 Contribution Report

Amounts may be rounded to whole dollars.

497 CONTRIBUTION REPORT

NAME OF FILER Gameros for Costa Mesa Council District 2 in 2020			Date of This Filing 09/30/2020	RECEIVED CITY CLERK Date Stamp 20 SEP 30 PM 3:33 CITY OF COSTA MESA BY [Redacted]	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (714) 496-5500	I.D. NUMBER (if applicable) 1426477	Report No. 2020-7			
STREET ADDRESS 1300 Belfast Avenue		<input type="checkbox"/> Amendment to Report No. _____ (explain below)			
CITY Costa Mesa	STATE CA	ZIP CODE 92626	No. of Pages 1		

1. Contribution(s) Received

DATE RECEIVED	FULL NAME, STREET ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL, ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
09/28/2020	Int'l Union of Operating Engineers 150 E Corson St Pasadena, CA 91103 Committee ID # 743030 INKIND	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		1,653.11 <input type="checkbox"/> Check if Loan _____% Provide interest rate
09/30/2020	Tom Arnold [Redacted]	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	Retired Retired	250.00 <input type="checkbox"/> Check if Loan _____% Provide interest rate
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		 <input type="checkbox"/> Check if Loan _____% Provide interest rate

*Contributor Codes

IND – Individual
 COM – Recipient Committee (other than PTY or SCC)
 OTH – Other (e.g., business entity)
 PTY – Political Party
 SCC – Small Contributor Committee

Reason for Amendment: _____